## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) CATHOLICVOTE.ORG CANDIDATE FUND	FEC IDENTIFICATION NUMBER ▼  C C00494021
Check If X 24-hour report 48-hour report New report Amends report filed on	
Full Name (Last, First, Middle Initial) of Payee American Majority Action  Mailing Address PO Box 309	10 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Purcellville VA 20134	2250.00 nsaction ID : SE.12763
Purpose of Expenditure Mailer  Category/ Type  Office So  Name of Federal Candidate Supported or Opposed by Expenditure:  MITTROMNEY  Check C	Senate District: President
WITTROWNET	ement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee American Majority Action  Mailing Address PO Box 309	10 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ar	nount
	2250.00 Insaction ID : SE.12764
Purpose of Expenditure Mailer  Category/ Type  Office Solution  Name of Federal Candidate Supported or Opposed by Expenditure:	ought: House State: FL Senate District: President
BILL NELSON Check C	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 4500.00 Disburse 2012	ement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	4500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Joshua O Mercer  [Electronically Filed] Date 10	26 2012
Signature	

## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
CATHOLICVOTE.ORG CANDIDATE FUND	C C00494021	
Check If X 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
Capitol Promotions	Date	
Mailing Address PO Box 231	10 26 2012	
	Amount	
City State Zip Code Glenside PA 19038	1000.00 Transaction ID : SE.12762	
	e Sought: House State: PA  Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:  TOM SMITH  Check	President  Sk One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 1000.00 Disbrace 2012	ursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
Mailing Address	Amount	
	Amount	
City State Zip Code		
Purpose of Expenditure Category/ Type Office	e Sought: House State: Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President  ck One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	1000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	5500.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Joshua O Mercer [Electronically Filed] Date	0 26 2012	
Signature		